

Application Data Sheet

Application Information

Application number::
Filing Date:: 01/21/04
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: DIAGNOSTIC DETECTION OF NUCLEIC ACIDS
Attorney Docket Number:: 018651-000321US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 1
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Ekkehard
Middle Name::
Family Name:: Schuetz
Name Suffix::
City of Residence:: Goettingen
State or Province of Residence::
Country of Residence:: Germany
Street of Mailing Address:: Beekweg 23
City of Mailing Address:: Goettingen
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 37079

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Howard
Middle Name:: B.
Family Name:: Urnovitz
Name Suffix::
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 783 - 22nd Avenue
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94121

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/115,278	04/01/02
10/115,278	An appln claiming	60/280,523	03/30/01
	benefit under 35 USC		
	119(e)		

Foreign Priority Information

Country::	Application number::	Filing Date::
-----------	----------------------	---------------

Assignee Information

Assignee Name:: Chronix Biomedical Inc.

Street of mailing address:: 1735 N. First Street, Suite 309

City of mailing address:: San Jose

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 95112